

Filing at a Glance

Companies: Ansur America Insurance Company, Frankenmuth Mutual Insurance Company

Product Name: All States WC Revision

SERFF Tr Num: FRNK-125212099 State: Arkansas

TOI: 16.0 Workers Compensation

SERFF Status: Closed

State Tr Num: AR-PC-07-025424

Sub-TOI: 16.0004 Standard WC

Co Tr Num: CLARFGWC-31

State Status:

Filing Type: Rule

Co Status:

Reviewer(s): Betty Montesi, Carol
Stiffler, Brittany Yielding

Authors: Sarah Jones, Mercia
Meyer, Alice Jaruzel, Angela
Schmitzer, Shelly Hawes

Disposition Date: 07-16-2007

Date Submitted: 07-11-2007

Disposition Status: Approved

Effective Date Requested (New): 01-01-2008

Effective Date (New): 01-01-2008

Effective Date Requested (Renewal): 01-01-2008

Effective Date (Renewal):

General Information

Project Name: Multistate WC Class, LC and Hazard Group Revision - Status of Filing in Domicile: Not Filed
Eff. 1-1-08

Project Number: 15373

Domicile Status Comments: Not required to file.

Reference Organization: NCCI

Reference Number: Item B-1397

Reference Title: Countrywide--Item B-1397--Revisions to Basic Manual Advisory Org. Circular: CIF-2006-08

Classifications and Rule

Filing Status Changed: 07-16-2007

State Status Changed: 07-12-2007

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

See Cover Letter.

Company and Contact

Filing Contact Information

Sarah Jones, Analyst I

sarah.jones@ffgrp.com

One Mutual Avenue

(989) 652-6121 [Phone]

Frankenmuth, MI 48787

(989) 652-5509[FAX]

Filing Company Information

Ansur America Insurance Company

CoCode: 10984

State of Domicile: Michigan

One Mutual Avenue

Group Code: 1309

Company Type: Property &
Casualty

Frankenmuth, MI 48787

Group Name: Frankenmuth
Financial Grp

State ID Number:

(989) 652-6121 ext. 2485[Phone]

FEIN Number: 38-3467437

Frankenmuth Mutual Insurance Company
One Mutual Avenue

CoCode: 13986
Group Code: 1309

State of Domicile: Michigan
Company Type: Property &
Casualty

Frankenmuth, MI 48787

Group Name: Frankenmuth
Financial Grp

State ID Number:

(989) 652-6121 ext. 2485[Phone]

FEIN Number: 38-0555290

Filing Fees

Fee Required? Yes
Fee Amount: \$50.00
Retaliatory? No
Fee Explanation: \$25.00 for Ansur
\$25.00 for FMI
Per Company: No

CHECK NUMBER	CHECK AMOUNT	CHECK DATE
354119	\$50.00	06-21-2007

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Carol Stiffler	07-16-2007	07-16-2007

Disposition

Disposition Date: 07-16-2007

Effective Date (New): 01-01-2008

Effective Date (Renewal):

Status: Approved

Comment:

Rate data does NOT apply to filing.

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	NAIC Loss Cost Filing Document for Workers' Compensation	Approved	Yes
Supporting Document	NAIC loss cost data entry document	Approved	Yes
Supporting Document	Cover Letter	Approved	Yes

Rate Information

Rate data does NOT apply to filing.

Supporting Document Schedules

Satisfied -Name:	Uniform Transmittal Document- Property & Casualty	Review Status: Approved	07-16-2007
Comments:			
Attachment:	Property & Casualty Transmittal Document, PC TD-1.pdf		
Satisfied -Name:	NAIC Loss Cost Filing Document for Workers' Compensation	Review Status: Approved	07-16-2007
Comments:	This is an adoption filing only.		
Satisfied -Name:	NAIC loss cost data entry document	Review Status: Approved	07-16-2007
Comments:	This is an adoption filing only.		
Satisfied -Name:	Cover Letter	Review Status: Approved	07-16-2007
Comments:			
Attachment:	Cover Letter.pdf		

PC TD-1 pg 1 of 2

Property & Casualty Transmittal Document---

20.	This filing transmittal is part of Company Tracking #	CLARFGWC-31
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21.	Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]
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Please refer to filing memo for additional information.

22.	Filing Fees (Filer must provide check # and fee amount if applicable) [If a state requires you to show how you calculated your filing fees, place that calculation below]
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Check #:	354119
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Amount:	\$50.00
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N/A

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**



July 12, 2007

Subject: Workers' Compensation Rule Filing
Effective January 1, 2008; Filing Number CLARFGWC-31
Ansur America Insurance Company, NAIC 10984
Frankenmuth Mutual Insurance Company, NAIC 13986

Dear Commissioner:

Frankenmuth Financial Group would like to file the following revision to our Workers' Compensation Program:

We wish to adopt NCCI's Item B-1397 Classification revision with an effective date of 1-1-08.

Should you have any questions regarding this filing, you can contact me at 800-234-1133, Ext. 2486 or sarah.jones@ffgrp.com.

Sincerely,

Sarah Jones

Sarah Jones
R&D Analyst I

Enclosures

Project # 15373